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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: Dell Rapids Tribune		2. DATE: 10/19/16
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $29.09 in County, $36.13 out of County
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 511 W 4th Street, Dell Rapids, Minnehaha, SD 57022		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): PO Box 5034, Sioux Falls, SD 57117-5034		
6. FULL NAME OF PUBLISHER: Bill Albrecht		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Gannett MHC Media, Inc.	Gannett Co., Inc. 7950 Jones Branch Drive, McLean, VA 22107

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1641	1415
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	448	465
2. Mail Subscription (Paid and or requested)	290	279
3. Paid Electronic Copies		
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	738	744
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS		
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	101	102
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	839	846
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	731	556
2. Return from News Agents	71	13
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1641	1415

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

[signature] (Signature)

President + Publisher (Title)

State of South Dakota)
County of Minnehaha)

RHONDA ROBB
NOTARY PUBLIC
SOUTH DAKOTA
SEAL

Sworn to before me this 19th day of Oct, 20 16

[signature] Notary Public

My commission expires: 11/24/20

(Seal)

Form: SOS REC 051 9/2016